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CROOKED FACES
THEY CAN BE PREVENTED



HERE ARE SMILES

The smile is the most important feature of any face. It radiates warmth, friendliness and appreciation. It should be the most attractive view possible.

Unhappily, many a beautiful smile is spoiled by crooked teeth. The lower jaw may extend beyond the upper jaw, like that of a bull-dog. There may be one or two teeth twisted or jutting out or crowded between two others. Or perhaps one side of the jaw is a different shape from the other side.

the lower jaw
may extend beyond
the upper jaw



one side of the
jaw is a different
shape from the
other



one or two teeth
may be twisted



P

ermanent changes in the shape of the jaw and the face can result from very slight pressure of the tongue or lips, if it is continuous.

The most obvious example is that of the "mouth-breather." A child suffering from enlarged adenoids, for example, breathes with his mouth open. The upper lip is not exerting any pressure on the front teeth, but the tongue is pressing from behind. When the mouth is open, there is tighter muscle pressure from the cheeks, and these factors result in narrowing the upper jaw, or arch, and causing "buck-teeth."

Irregular teeth may be caused whenever the pressure of the cheeks and lips against the outside of the teeth is greater or less than the pressure of the tongue against the inside of the teeth.

There are many other forms of pressure that distort bone growth. For example: tongue thrusting, lip biting and thumb-sucking, if persisted in vigorously up to five or six years of age and beyond, may cause irregularity of the teeth that is difficult and expensive to correct. The pressure from these habits is often greater than that used by the orthodontist to move teeth, and may press the new permanent teeth out of their proper positions as they grow in. The dentist can advise whether or not the habit is having a harmful effect, and if so the help of both the dentist and the physician may be needed to correct it.

EVEN

A

CHILD



mouth breather

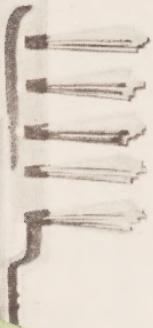


thumb sucker

CAN
DO
IT



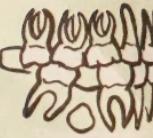
the TOOTH *that got away*



Another common reason for malocclusion is the tooth that got away too soon. If a baby tooth decays and is lost or has to be pulled out before the permanent tooth is ready to take its place, the teeth on each side of the space where it was will tip over toward each other, closing the space. When the permanent tooth does try to come through, the space that it should have is already occupied, and it has to twist and shift out of line in order to find room for itself.

This form of malocclusion is easy to prevent. First, the number of cavities can be greatly reduced by teaching the very young child to brush his teeth immedi-

ately after eating, and by seeing that he does not eat candy and sweet foods too frequently. Secondly, have the child's baby teeth cared for by a dentist from the age of 3. Then tiny cavities can be filled before they destroy the tooth to the point where it has to come out. Thirdly, if a tooth is lost too soon, the dentist can put a "space maintainer" between the remaining teeth to hold the space for the permanent tooth.



DON'T
BLAME



"GRAND PA"



Irrregularly shaped jaws and teeth are sometimes inherited. But for every child who is born with such hereditary tendencies, four children either cause the irregularity themselves or their parents let it develop through lack of dental care. Even the fifth child, the one who "got his buck-teeth from his father," can, through proper dental care, improve or correct this condition.

The important fact is that in most cases, malformed teeth and jaws can be prevented. **FOUR OUT OF FIVE PEOPLE** with irregular teeth have let this condition develop because they or their parents did not know the causes of malocclusion or did not know it could be corrected.

X-ray and dental examination around six years of age may reveal many causes of future irregularity of the teeth and face before they have a chance to cause permanent changes in growth.

PUTTING ON THE PRESSURE



During growth, bone is much more easily distorted than most people realize. Its shape and growth can be altered by very slight pressure, as has been demonstrated from prehistoric times up to the present by people who had their own ideas of beauty.

Among the Flathead Indians it was fashionable to be a "pointy-head." By exerting gentle pressure on the heads of their babies, they made them grow into a strange shape with, apparently, no discomfort to Junior.

Young Padoung girls of Burma made sure they would be noticed in a crowd. By adding, one at a time, snug-fitting metal neck bands one below the other, they actually produced increased growth in the spinal column bones of the neck.

Up until the early part of this century the feet of young Chinese girls were tightly bandaged. This resulted in very tiny distorted feet, a mark of beauty in those times.

Even your grandmother's "wasp-waist" was a distortion caused by a very tight corset which forced the rib-cage up and out.

Even today, examples of bone distortion due to abnormal pressure can be found. Look at the bow-legged cowboy or the hump-backed shoemaker whose jobs cause them to work in abnormal positions.



Sometimes, for no reason that anyone can find, a child's teeth may arrive in the wrong order. Nature has worked out the best order for them to come so that new teeth appear at places where there is space for them. Sometimes teeth appear at inconvenient times and the resulting "jumbling" causes irregular teeth. Fortunately X-rays tell the dentist what is going on and comparatively simple treatment carried out at around 7 years can correct the situation before the growth pattern of the jaws is seriously affected.

It is hard to change habits. The help of both the physician and dentist may be required. Mouth-breathing, for instance, is often caused by adenoids or enlarged tonsils which should receive the attention of the physician. But even when the cause has been removed, the child may have to learn exercises to teach him to breathe through his nose and to press his lips against his teeth to equalize the thrusting pressure of his tongue. In many such cases, too, the help of a speech therapist may be needed.



X-rays can
tell the story...

and
the dentist can
change the plot



*
GRAZY
MIXED
UP *
TEETH



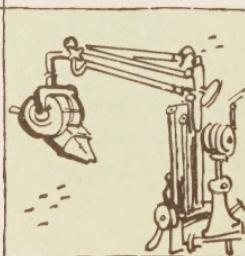
An OUNCE of prevention

Parents can help forestall malocclusion in several ways. First, a good diet based on Canada's Food Guide and daily doses of Vitamin D up to age sixteen will help grow strong, healthy bones.

Just as important as good food is the encouragement of good eating habits.

Children should start regular visits to the dentist at the age of three. Early attention to small cavities will lengthen the lives of all teeth, but is particularly important for the baby teeth.

Tonsils and nasal obstructions should be removed if the family doctor finds that they interfere with normal breathing. Habits causing abnormal pressure upon the teeth, if vigorously continued beyond infancy, should be corrected if a dentist finds that injury is being done.



CANADA'S FOOD

GUIDE

MILK

FRUIT

VEGETABLES

CEREALS and BREAD

MEAT and FISH

VITAMIN D



the TEETH

that should

get LOST

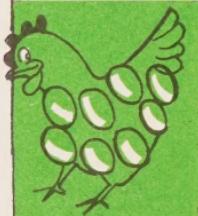
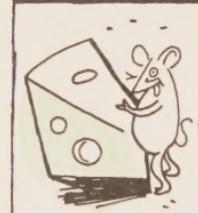
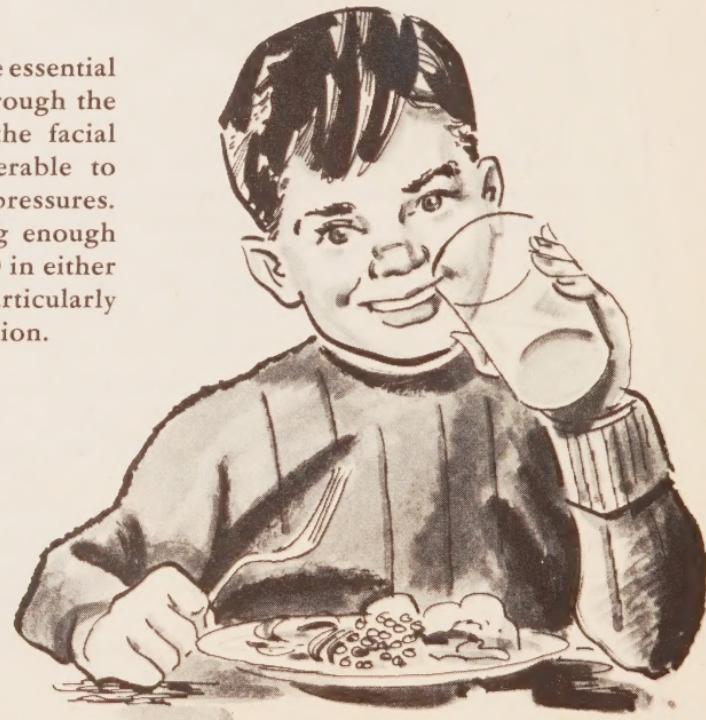
Once in a while a baby tooth outstays its welcome. Long after the permanent tooth is ready to come through, the old baby tooth hangs on to the space it should vacate. The permanent tooth is coming anyway, and if it can't go where it belongs it will come out at an angle beside the other tooth. This can be prevented very simply by the dentist who will take out the sluggard tooth and make room for the new permanent one at the proper time.

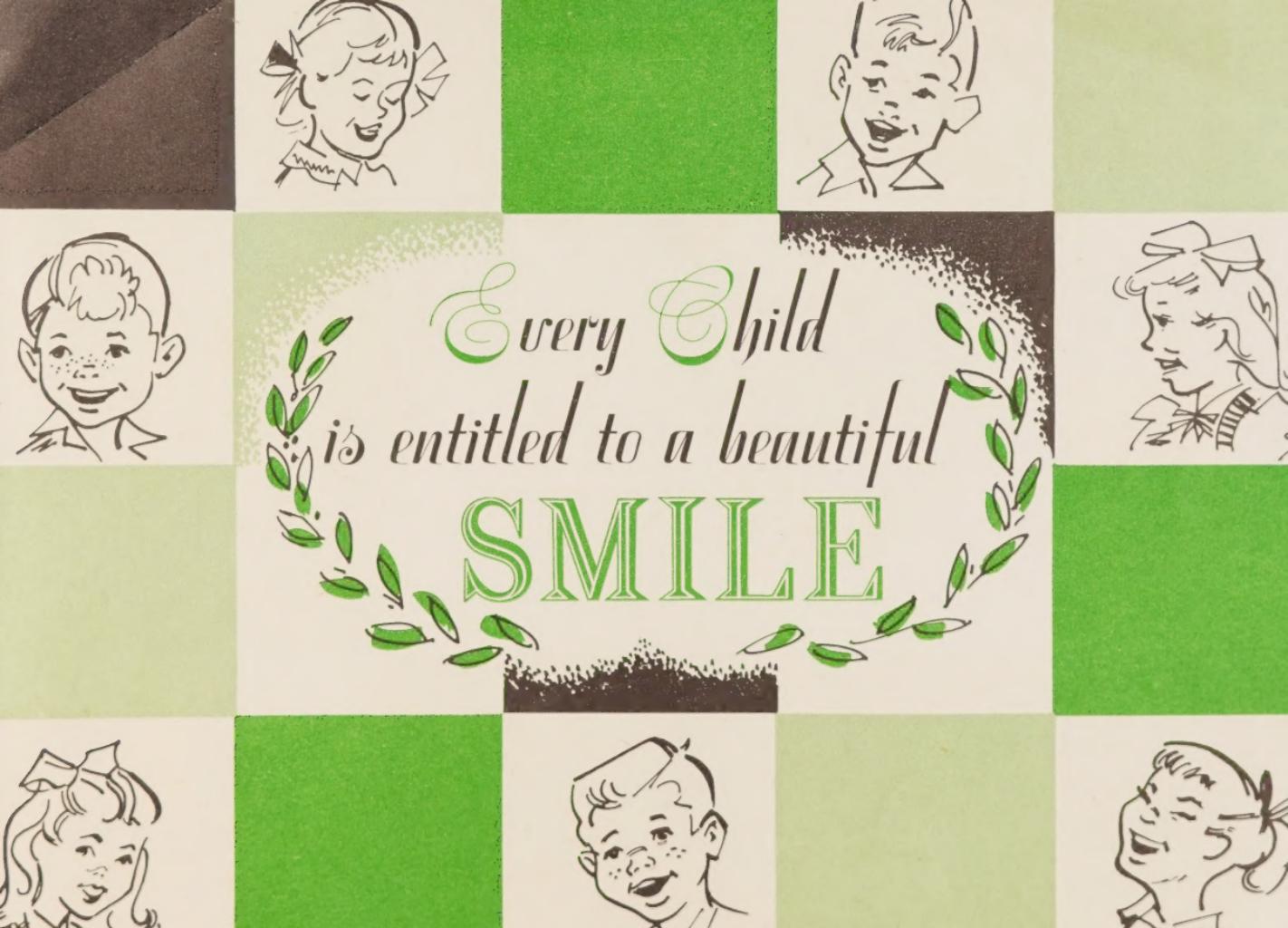
Sometimes an extra tooth comes in, a little peg-shaped affair that has no business there in the first place. Unless the dentist has a chance to see it and take it out, it will be responsible for overcrowding and resulting distortion.



It may be something he should have eaten

Vitamin D and calcium are essential for proper development through the period of growth, when the facial bones are especially vulnerable to even very light abnormal pressures. A child who is not getting enough milk, cheese and Vitamin D in either liquid or capsule form, is particularly susceptible to bone distortion.





Every Child

is entitled to a beautiful

SMILE



Dental Health Division

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